PATENT APPL FION FEE DETERMINATION RECC

Application or Docket Number

300000									/	0/5	1522084		
		CLAIMS	AS FILED - PART I					SMALL E	VIIIY		OTHER THAN		
	S NATIONAL	STAGE FEEC	(Column 1)		(Column 2)		7	TYPE	. 🗀 .	OF —	₹ SMALL	ENTITY	
U.S. NATIONAL STAGE FEES					<u> </u>		4	RATE	FEE		RATE	FEE	
BASIC FEE			SMALL ENT. = \$ 150 Satisfies PCT Article 33(1)		LARGE ENT. = \$ 300			BASIC FEE		OR	BASIC FEE	301	
EXAMINATION FEE			(4) = \$50/\$100 U.S. is ISA = \$50/\$100		\$ 100 / \$ 200			EXAM. FEE		7	EXAM. FEE	ro	
SEARCH FEE			ALL other countries = \$200/\$ 400		All other situations = \$ 250 / \$ 500		l	SEARCH FEE		7	SEARCH FEE		
FEE FOR EXTRA SPEC. PGS.			49 minus 100 =			<i>1</i> 50 =		X \$ 125 =		1	X \$ 250 =		
TOTAL CHARGEABLE CLAIMS			/5 minus 20 =		•		1	X \$ 25 =		OR		+	
INDEPENDENT CLAIMS			2 minus 3 =				1	X \$ 100 =		OR			
		IDENT CLAIM PR						+\$ 180 =	1	OR	+ \$ 360 =	+	
• If	the difference	e in column 1 is	less than zen	o, enter 10	in co	lumn 2	•	TOTAL		OR	TOTAL	95	
CLAIMS AS AMENDED - PART [] (Column 1) (Column 2) (C								SMALL I	ENTITY	OR	OTHER	THAN	
AMENDMENT A .		CLAIMS HIGH		ST					7 /	SMALL	ENIIIY		
		AFTER AMENDMENT		PREVIO	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	1.75	Minus	••		=		X \$ 25 =		OR	X \$ 50 =	31	
	Independent	12	Minus .	***	٠	=		X \$ 100 =		OR	X \$ 200 =	21)	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT				IAM.			+\$ 180=		OR	+\$ 360 =	HIL	
	•		_				١	TOTAL ADDIT. FEE		OR	TOTAL ADDIT.	900	
_		(Column 1)		(Column	n 271	(Column 3)				•	, ,		
	•	CLAIMS		HIGHE	ST	(Column 3)	ī						
2		REMAINING AFTER AMENDMENT		PREVIOU PAID FO	ISLY	PRESENT . EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	** '		=	ſ	X \$ 25 =		OR	X \$ 50 =		
	Independent	• ·	Minus	REW		= .	ľ	X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					f	+ \$ 180 =		OR	+ \$ 360 =			
				•			Ļ	TOTAL ADDIT. FEE		L	TOTAL ADDIT.		
											FEE		
٠,	f the entry in colu	mn 1 is less than the	entry in cotons 3	urita es L.	·	•		•					
- 1	the "Highest Nur	nber Previously Paid	FOR IN THIS SPA	ACE le lore #	***	color 2200							
1	he "Highest Num	mber Previously Paid I ber Previously Paid I	cor (Total or Inde	Pendent) is the	zen "3", e ze highe	enter "3". Ist number faund in	the	appropriate box i	n column 1,				